

REQUEST, AUTHORIZATION, AGREEMENT AND CERTIFICATION OF TRAINING				A. Agency, code agency subelement and submitting office number (Example-xx-xx-xxxx)		01		B. OFFICE USE ONLY			
								C Request status (Mark (X) one)		02	
				Initial or Resubmission				Correction or Cancellation			
Section A--TRAINEE INFORMATION											
1. Applicant's name (Last- First- Middle Initial)				Enter first 6 letters of last name		03		2. Social Security Number		04	
								3. Date of birth (Year and Month)		05	
										Example--born January 14, 1943 Shown as 43/01	
4. Home address (Number, Street, City, State, ZIP code)				13 Home telephone				6 Position level (Mark (X) one only)			
				Area Code		Number		a. Non-supervisory		c. Manager	
								b. Supervisory		d. Executive	
7. Organization mailing address (Branch- Division/Office/Bureau/Agency)				8. Office telephone				9. Continuous civilian service		10. Number of prior non-government training days	
				Area Code		Number		Extension			
								Years		Months	
11a. Position title/function				11b. Applicant handi-capped or disabled (See instructions)				12. Pay Plan/series/grade/step		13. Type of appointment	
										14. Education level	
Section B--TRAINING COURSE DATA											
15a. Name and mailing address of training vendor (No., Street, City, State, ZIP code)						15b. Location of training site (If same, mark box) <input type="checkbox"/>					
16. Course title and training objectives (benefits to be derived by the Government)											
17. Catalog/Course No.		18. Training period (6 digits)				06		19. No. of course hours (4 digits)		07	
		Year		Month		Day		a. During duty		Code	
								b Non-duty		a. Purpose	
								TOTAL		b. Type	
										08 c. Source	
										09 d. Special Interest	
										10	
										11	
AGENCY USE ONLY											
Section C--ESTIMATED COSTS AND BILLING INFORMATION						Section D--APPROVALS					
21. Direct costs and appropriation/fund chargeable						26a. Immediate supervisor--Name and title					
Item		Amount		Appropriation/fund						Area code/Tel. No./ Extension	
		Dollars Cents									
a. Tuition						b. Signature				Date	
b. Books or materials											
c. Other (Specify)						27a. Second-line supervisor--Name and title				Area code Tel. No./ Extension	
d. (Enter 4 digits in dollar column)		12				b. Signature				Date	
TOTAL											
22. Indirect costs and appropriation/fund chargeable						28a. Training Officer--Name and title					
Item		Amount		Appropriation/fund						Area code Tel. No./ Extension	
		Dollars Cents									
a. Travel						b. Signature				Date	
b. Per Diem											
c. Other (Specify)											
d. (Enter 4 digits in dollar column)		13									
TOTAL											
23. Document/Purchase Order / Requisition No.						29a. Authorizing Officer--Name and title					
						b. Signature				Approved Date	
										Disapproved	
24. 8-Digit station symbol (Example-- 12-34-5678) _____						Section F--CERTIFICATION OF TRAINING COMPLETION					
25. BILLING INSTRUCTIONS (Furnish invoice to):						30a. Certifying Official--Name and title				Area code/Tel. No./ Extension	
						b. Signature				Date	
TRAINING FACILITY Bills should be sent to office indicated in item 25. Please refer to number given in item 23 to assure prompt payment.											

NOTE: This agreement must be signed by the nominee for all **non-government** training that exceeds 80 hours (or such other designated period, 80 hours or less, as prescribed by the agency) and for which the Government approves payment of training costs prior to the commencement of such training. Nothing contained in Section G below shall be construed as limiting the authority of an agency to waive, **in whole or in part**, an obligation of an employee to pay expenses incurred by the Government in connection with the training.

Section G—EMPLOYEE'S AGREEMENT TO CONTINUE IN SERVICE

1. I AGREE that, upon completion of the Government-sponsored training described in this request, if I receive salary covering the training period, I will serve in the agency three times the length of the training period. If I receive no salary during the training period, I agree to serve the agency for a period equal to the length of training, but in no case less than one month. (The length of part-time training is the number of hours spent in class or with the instructor. The length of full-time training is eight hours for each day of training, up to a maximum of 40 hours a week). NOTE: For the purposes of this agreement, the term "agency" refers to the employing organization (such as an Executive Department or independent establishment), not to a segment of such an organization.
2. If I voluntarily leave the agency before completing the period of service agreed to in item 1 above, I AGREE to reimburse the agency for the tuition and related fees, travel and other special expenses (EXCLUDING SALARY) paid in connection with my training. These amounts are reflected in items 21 and 22.
3. I FURTHER AGREE that, if I voluntarily leave the agency to enter the service of another Federal agency or other organization in any branch of the Government before completing the period of service agreed to in item 1 above, I will give my organization written notice of at least ten work days, during which time a determination concerning reimbursement will be made. If I fail to give this advance notice, I AGREE to pay the amount of additional expenses (5 U.S.C. 4109(a)(2)) incurred by the Government in this training.
4. I understand that any amounts which may be due the agency as a result of any failure on my part to meet the terms of this agreement may be withheld from any monies owed me by the Government, or may be recovered by such other methods as are approved by law.
5. I FURTHER AGREE to obtain approval from my organization training officer and that person responsible for authorizing non-government training requests of any proposed change in my approved training program involving course and schedule changes, withdrawals or incompletions, and increased costs.
6. I acknowledge that this agreement does not in any way commit the Government to continue my employment. I understand that, if there is a transfer of my service obligation to another Federal agency or other organization in any branch of the Government, the agreements in items 1, 2, and 3 of this section

31. Period of obligated service

(For non-government training only)----->

32. Employee's signature

Date: